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Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450

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Barbara Villani

Attorney Docket No. 03481/LH Pursuant to 37 CFR 1.53(b), transmitted herewith for filing is the patent application of

Inventor(s):

Mitsuhiko YAMAMOTO of Fussa-shi, Japan Masao YONEMURA of Kobe, Japan Yuka OMODAKA of Kobe, Japan Tomoko MAEHARA of Kobe, Japan

"CHEMICAL TREATMENT METHOD AND CHEMICAL TREATMENT APPARATUS"

Priority Claim (35 U.S.C. 119) is made, based upon:

Japan

No. 2002-240452

filed August 21, 2002

ASSIGNMENT INFORMATION FOR PUBLICATION:

CASIO MICRONICS CO., LTD. 10-6, Imai 3-chome, Ome-shi, Tokyo, Japan

MURATA Co., Ltd. 2-8, Tsutsui-cho 2-chome, Chuo-ku, Kobe, 651-0071 JAPAN

Enclosed herewith are:

[X]	Specification (Description, Claims, Abstract): Pages 1 - 73 ; Number of claims 1 - 23
[X]	Declaration and Power of Attorney 1 x

Declaration and Power of Attorney [X] executed; [] unexecuted (supplied for information purposes)

[X] 17 Sheets of drawings, Figures 1 - 17 [X] Formal [] Informal [X]

Assignment and "Patents" Recordation Form Cover Sheet (PTO-1595) AND \$40. RECORDATION FEE.

[X] Certified copy of priority document identified above

[X] Information Disclosure Statement; [X] Form PTO/SB/08A

Preliminary Amendment []

Applicant(s) Claim(s) Small Entity Status

Change of Correspondence Address (Form PTO/SB/122) [X]

[X] Receipt Postcard

Total Claims Independent Claims MULTIPLE DEPENDE	Number Filed	Number Extra	x \$18.00 = x \$84.00 = + \$280.00 =	Calculations \$ 666.00 \$ 168.00
		BASIC		\$ <u>280.00</u> \$ 750.00
To the extent not tender	ed by check authori	Total of above	Calculations	\$ <u>1,864.00</u>

To the extent not tendered by check, authorization is given to charge any less under 37 CFR 1.16 and 1.17 during pendency of the application, or to credit any overpayment, to Deposit Account No. 06-1378. Duplicate copy of this letter is enclosed.

By:

FRISHAUF, HOLTZ, GOODMAN & CHICK, P.C.

LH:by

12/00

LEONARD HOLTZ Reg. No.22,974

FRISHAUF, HOLTZ, GOODMAN & CHICK, P.C. ATTORNEYS AT LAW

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	Number Filed	Tara Treat	Number Extra	Rate	Calculations
Total Claims	<u>57</u> -20	=	_37	x \$18.00 =	\$ <u>666.00</u>
Independent Claims	53	=, .		x \$84.00 =	\$ 168.00
MULTIPLE DEPENDENT CLAIMS				+ \$280.00 =	\$_280.00
BASIC F			C FEE	\$ 750.00	
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